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ABSTRACT

This report responds to Delaware state legislation requiring the development of proposed revised regulations for the classification of students as learning disabled (LD). The report first describes the current system, noting that in 1997 15 percent of the student population were served under the Individuals with Disabilities Education Act and over 61 percent of these children are categorized as having specific learning disabilities. This section also provides the state's current definition of "learning disability" and a chart showing the numbers of students identified as LD. Barriers and problems as well as strengths/assets of the current system are identified. A major conclusion of the report is that without changes to the funding formula and the allocation of resources, the impact of any other changes will be short lived. A section on proposed changes in the overall system addresses guiding principles, a problem-solving model, a formative intervention process, formal assessment procedures, and the development of intervention strategies. Specific recommendations are offered concerning: (1) a proposed learning disability definition and eligibility criteria; (2) a proposed developmental delay definition and eligibility criteria; (3) preschool services for children with disabilities; (4) K-3 services; (4) 4-12 services; and (5) other recommendations. A list of work group members is appended. (DB)

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Learning Disabilities

Final Report

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Learning Disabilities Report

Background

Legislative Request

The 139th General Assembly in HB 758 requested:

> "The Department of Education shall prepare and submit to the State Board of Education revised regulations to improve the definitions and procedures used to determine whether students are classified as learning disabled, educable mentally handicapped, or seriously emotionally disturbed for purposes of the class size unit funding formula in Chapter 17 of Title 14. In preparing such regulations, the Department shall seek the assistance of the State Public Health Director, the State's medical community, and local school district personnel expert in these issues to assure that the revised regulations are based on sound medical and educational principles. The Department of Education shall report to the General Assembly on or before January 15, 1999 on its progress in this regard."

The General Assembly requested the review and proposed revisions in part because of the large number of children identified as students with learning disabilities in Delaware.

A Work Group was formed (see membership in Attachment A) and met with Dr. Kevin Dwyer, President-Elect of the National Association of School Psychologists (NASP) and a national expert in the area of disabilities including learning disabilities. This paper is the result of their work.

Current System

Despite the fact that detailed procedures are found in the Code of Federal Regulations (CFR) for the Individuals With Disabilities Education Act (IDEA), the accurate diagnosis of specific learning disabilities has been a national controversy for decades (Telzrow, 1990). There are claims that children served under this category are not distinguishable from children who are "slow-learners," Title I, or children who have not experienced adequate instruction (Reschley, 1988) and that proper intensive instruction in the primary grades, remedial and other supports would dramatically reduce the number of children categorized as specific learning disabled.

Delaware has designed a procedure for complying with the CFR and to better ensure accurate diagnosis and eligibility determination. However, this procedure is seen to have failed in meeting these desired goals. The number of children identified as having specific learning disabilities has been approximately 9% of the total school population in Delaware for the past four years.

There is expert consensus that the number of children with specific learning disabilities should range within 4-5% of the total school population and that this percentage should be relatively consistent across local school systems, with some minor variation due to poverty related factors. The 1997 19th Annual Report to Congress on the Implementation of IDEA reported that a national average of about 5.5% of school-age children are categorized as learning disabled and served under IDEA. On average, 10.6% of school children are served under all IDEA disability categories and specific learning disabilities accounts for more than half of the total.

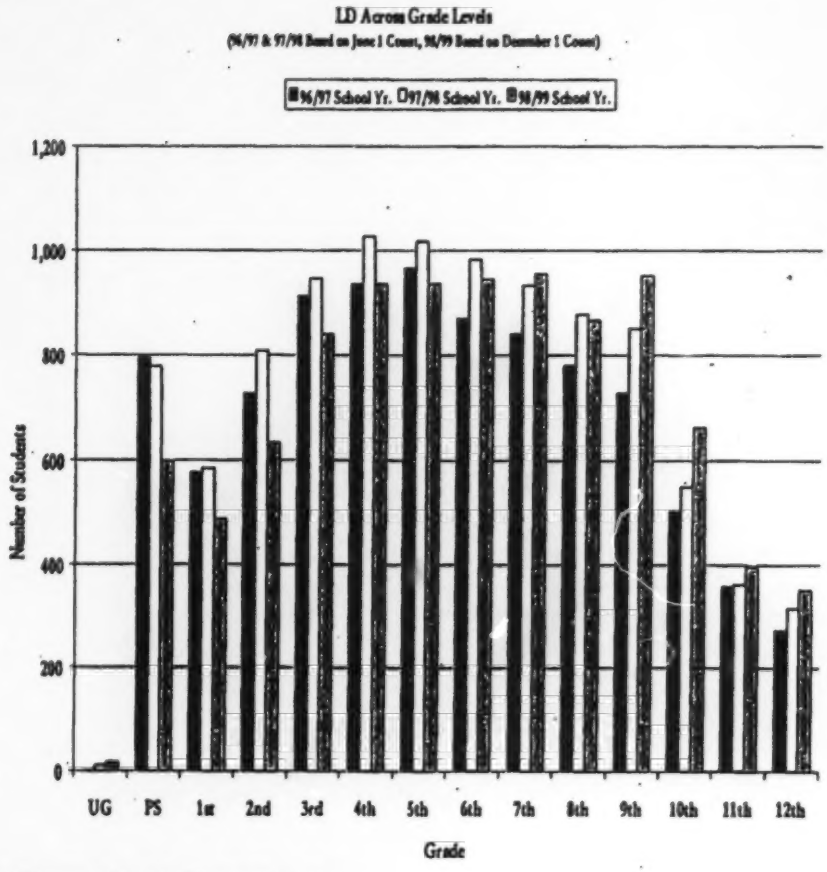
> **In Delaware during the 1997-98 school year 15% of the student population was served under IDEA and over 61% of these children are categorized as specific learning disabilities.**

The current special education eligibility system uses a categorical base. Services are tied to identification. Many services are not available to students if they do not "qualify" under one of the categories. The current system addresses the learning needs of students with disabilities, but does not address the needs of children with learning needs caused by environmental factors and/or inappropriate instruction. In order to get these children the help they need many end up being identified as having a disability and eligible for special education.

Delaware's Current Definition for a Learning Disability (AMPEC) states:

> A learning disability is an impairment of one or more basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself as a deficit in the functional ability to listen, speak, read, write or spell, or to perform mathematics tasks. It may be indicated after a student has received systematic instructional intervention over a period of time which fails to alleviate the deficit. The term includes, but is not limited to, such conditions described as perceptual disabilities, central auditory processing deficits, brain injury, attention deficit disorders, hyperactivity, dyslexia, and developmental aphasia. A learning disability may occur concomitantly with, but shall not be primarily the result of, other disabling conditions such as visual, hearing, or motor handicap, mental handicap, autism, serious emotional disturbance, or environmental, cultural, and/or economic influences.

The following chart illustrates the identification of LD students across the grades. The chart shows the impact of failure to learn to read in the early grades. The high number of pre-school and first/second grade students indicates a group of children with needs but no other way to get the help they need other than labeling them as learning disabled.



Barriers/Problems with the Current System

- Although interventions have been increasing in recent years (extra time funding), they have been limited for children with learning needs outside of the special education system.
- The current funding system provides incentives for the identification of children as special education students.
    - Regular education K-3 = one teacher unit/17.4 students
    - Regular education 4-12 = one teacher unit/20 students
    - Learning Disability age 4/K-12 = one teacher unit/8 students
    - Emotionally Disturbed age 4/K-12 = one teacher unit/10 students
    - Educable Mental Handicap age 4/K-12 = one teacher unit/15 students.

- The current funding system promotes two systems - a regular education system and a special education system. In order to be counted for full-time special education a student must be under direct instruction of a certified special education teacher for at least 12.5 hours/week. This limits the flexibility schools have in using consultative models. It also ties the provision of instruction and support to children who have been labeled as eligible for special education.
- Labeling a child as learning disabled has become an acceptable practice for children who are having difficulty learning.
- The Developmental Delay category is not available for young children (other than three-year-olds) and schools have no options other than to label children as learning disabled.
- There is a lack of reading instruction and curriculum that is appropriately matched to the needs of young children. Teachers tend to know one way to teach reading and schools select one textbook series. Students who encounter difficulty in learning to read will fall further and further behind as they move up the grades.
- The current system results in high identification of African American children.
- The current eligibility process ties assessment to identification of a disability rather than to gathering information relevant to the instructional/learning process. It is time consuming and staff intensive and does not lead to improved outcomes for the child.

Strengths/Assets of the Current System

- The unit funding structure is strong and provides a firm financial base for the educational program. Although it needs modifications in order to better meet the needs of today's children, it should continue as the base for the system.
- There are a lot of resources both in terms of staff and money in the system. The challenge is to more effectively use them to meet the needs of all students.
- The full implementation of the accountability system will provide rich data to help make better educational decisions for children and to evaluate the effectiveness of programs.

Although this group was not asked to review funding, it came to the unanimous conclusion that without changes to the funding formula and the allocation of resources, any impact will be short lived.

Proposed Changes

How the system should look

Research has shown that the over identification of children as having specific learning disabilities and needing services under IDEA is directly related to the lack of individualized and remedial instruction in basic skills within the regular education primary grades (Ysseldyke, et.al.,

1986, Batsche & Knoff, 1994). Instruction in reading is most critical since referrals for specific learning disabilities are primarily for reading failures. Most researchers and the National Joint Committee on Learning Disabilities recommend that: "When a student is having a problem that involves significant difficulty in the acquisition and use of listening, speaking, reading, writing, reasoning or mathematical abilities, a (team) problem solving process should begin." (NJCLD, 1997). This team problem-solving requires a group of well-trained, qualified and skilled experts in learning and behavior who can assist the teacher and staff in designing interventions, accommodations and strategies to remedy the problem. The consulting team should also identify needed resources to carry out the remedies and provide ongoing support to the teacher/staff as well as methods for the measurement of the effectiveness of the interventions.

When the team problem-solving recommendations are implemented and the result is effective, those supportive interventions may be incorporated into ongoing instruction, reduced or modified as determined by measured results. When the interventions are not successful that information should be utilized to determine if other regular education interventions are necessary or, if a referral for formal assessment is appropriate.

The information gathered by the instructional/behavioral problem-solving team concerning the child's responses to the interventions becomes the foundation for the assessment and evaluation for eligibility. Curriculum-based measurements of progress enable the team to determine if a disability may exist and the intensity of services needed to address the child's needs. Such curriculum based monitoring, formative evaluation and behavioral supports have been shown to have significant positive effects on academic and behavioral achievement goals (Fuchs & Fuchs, 1986, Kavale, 1990).

Guiding Principles

- Students identified under the current system are students with learning difficulties or learning needs. Finding ways to keep them from being "eligible" will not eliminate their need for help. Therefore, the system must be responsive to, and responsible for, the needs of all children.
- All staff must be trained and supervised so they can provide supports and services based on the needs of the individual student. There are limited alternatives outside of special education. If instruction and resources in general education are appropriate, the numbers of students identified as requiring special education will decrease. The proposed changes support:
    - Data based decisions for all students.
    - The availability of differentiated instructional and curricular strategies that can be used based on the needs of students.
    - The use of different instructional group size, again matched to the needs of students.
    - The use of consultative services.
    - Additional resources for para-educators or other specialized staff.

- The roles of current staff must change.
- Professional development is essential to support the proposed changes.
- Evaluation must be part of the system - we must have a way of knowing what is working and what is not at the individual and the program level. The evaluation model must also explore unintended consequences during implementation.

Problem Solving Model

The group is recommending the establishment of a problem solving model that is school based and builds from the student support teams that exist in most districts. These school based problem solving teams of two/three people will be available to assist classroom teachers and other building personnel with intervention strategies to meet the learning needs of all children within the school. The major difference in this proposal is that this will be the major component of the work scope for these personnel, not another add on. They will support all of the children in the school regardless of whether they are identified for special education.

The purpose of this team is to examine learning difficulties and implement a collaborative, problem-solving process prior to formal assessment. There will be real consultation and measurement of results. The team will analyze the teaching methods and materials, not just the student. Interventions will be classroom based.

The problem solving strategy involves:

- Problem identification.
- Hypothesis generation.
- Hypothesis testing (trial interventions).
- Intervention effectiveness/progress monitoring.

The Problem Solving Teams will:

- Involve parents who are critical partners in this process.
- Involve the child's teacher(s).
- Follow the problem solving process.
- Create profiles for students to document the intervention strategies tried and their outcomes. The profiles should also document what the student's curriculum and instructional experiences have been.
- Build a "best practices" database so that strategies can be effectively linked to student needs.
- Be designed to meet the needs of an individual school. School psychologists would be found across the grade levels, reading specialists and speech language pathologists would be found at the elementary level, etc.
- Change staff roles. School psychologists and special education teachers will spend more time with hands-on contact with students and hands-on time with teachers

providing consultation and support throughout this process. This problem solving approach will require a re-examination of the roles of related services personnel and special education staff. These roles will require new accountability standards, i.e., school psychologists cannot be evaluated based on the number of psychological evaluations they are able to complete in a year.

If this problem-solving model is used consistently for all children who are experiencing difficulties in learning, children will be helped earlier in the process (prevention). For example, we will know the system is working if 20% of students enter the formative evaluation process of the problem solving model, but only 30% of that 20% need to move on to formal assessments.

Formative Intervention Process

The purpose of this phase of the problem solving process is to document efforts within the general education classroom of interventions tried, based on the student's presenting problems. This phase is available to all children in the school. Although parent involvement is important, parental consent is not required, as these are services available to all of the children in the school. Data will be collected from sources such as:

- Curriculum based assessment/achievement.
- Systemic observation in naturalistic settings.
- Functional assessment and analysis.
- Analysis of developmental and educational history.
- Current health information.
- Analysis of instructional variables such as instructional strategies, setting and materials.
- Attainment on the performance indicators/DSTP.
- Behavioral checklists.

General education teachers, with consultation from the problem solving team and communication with the parents, will develop measurable, goal-directed strategies to resolve the presenting learning and/or behavioral problems. Data will be collected on the effect of the intervention(s) in a systematic, ongoing way. If the interventions are effective, they will continue as needed with periodic monitoring.

If, however, the presenting problems are resistant to general education interventions, or if they are effective but require continued and substantial effort that may include the provision of special education and related services, the problem solving team will conduct a full and individual evaluation.

Formal Assessment Procedures

This phase follows a process more familiar to special educators. However, there are distinct differences from the current evaluation process, in that the purpose of the evaluation continues to

be focused on student learning outcomes as opposed to diagnosis of disability. This phase of the process will include:

- Informed consent obtained from the parents prior to the beginning of formal assessment.
- Evidence of significant discrepancy from peers' performance levels in the area(s) of concern.
- Specific evaluations as determined by the problem solving team, which now must include the required membership of the child's IEP Team.
- There must be data from a variety of sources that support the decision of the team.

When this process is completed, the available information should provide a data based description of the instructional strategies, behavioral supports and related services necessary to allow the child to improve and maintain his/her rate of learning at acceptable levels.

Development of Intervention Strategies

If the child is eligible for special education, then interventions are outlined on the student's IEP. If the child has a disability, but does not need special education, then interventions are outlined through the student's 504 Accommodation Plan. Children who do not meet the eligibility criteria, but continue to perform significantly below expectations, should have an individual improvement plan.

All of these plans should indicate:

- modifications and/or accommodations needed for the student in the classroom,
- instructional strategies that work for the child, and
- instructional materials that are appropriate for the child.

Instruction should continue to follow the problem solving model and progress reporting should be frequent.

Stakeholder Input

The Work Group drafted preliminary recommendations based on the proposed model in February 1999. These recommendations were shared with a number of stakeholder groups over the next several months. All fifteen of the school districts that would be impacted by the proposed changes were visited and the district financial impact data shared. Presentations were also made to the Governor's Advisory Council for Exceptional Citizens (GACEC), the Delaware Association of School Psychologists (DASP), the Chief School Officers Meeting, the Special Education Supervisors Meetings, and a Sussex County DASP luncheon meeting. In addition, a number of individual responses were received.

Many of the comments and suggestions have been incorporated into the final recommendations. There were two themes that dominated the comments. The first related to the financial resources of the proposals and the need to avoid financial loss to any district during the transition period. The unit structure is accepted as a reliable funding system. Most people agreed some changes are needed, but it is more of a fine-tuning of the system to better meet today's realities than a major change to the underlying system. This discussion was always closely linked to the need to not ask people to do more with the same amount of resources. In several instances this discussion became linked to the number of children who would fail to meet the performance standard on the DSTP and the potential impact this would have on the problem solving team function.

The second theme related to the perceived taking away of "special education resources." This problem emerged even when the total number of units was held harmless. The final recommendations have several suggestions on how to alleviate some of these concerns as we move toward a single education system that is able to meet the needs of all children.

Recommendations

This section of the Report summarizes the final recommendations of the Work Group.

Proposed Learning Disability Definition and Eligibility Criteria

Proposed changes to Learning Disability definition and the Eligibility criteria for the Administrative Manual: Programs for Exceptional Children (AMPEC).

A. Definition

Learning disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical skills.

These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may not occur across the life span. Problems in self-regulatory behaviors, social perception, and social interaction may exist with learning disabilities but do not, by themselves, constitute a learning disability.

Although learning disabilities may occur concomitantly with other disabilities (e.g., sensory impairment, mental retardation, emotional disturbance), or with extrinsic influences (such as cultural differences, insufficient or inappropriate instruction), they are not the result of those conditions or influences.

National Joint Committee on Learning Disabilities (NJCLD), 1990.

B. Eligibility Criteria

In order for an IEP Team to determine eligibility for special education services under the Learning Disability category, the following is required:

1. Written documentation of the formative intervention process used with the student. The documentation must include a:

   - clear statement of the student's presenting problem(s).
   - summary of diagnostic data collected and the sources of that data.
   - summary of interventions implemented to resolve the presenting problem(s) and the effects of the interventions.

   and

2. A comprehensive psychological assessment to evaluate the student's reasoning and cognitive processes in order to rule out mental retardation and emotional disturbance.

   and

3. (a) Evidence of low achievement in language arts (reading, writing, listening, speaking) and/or math. Low achievement is defined as at or below the 5th percentile on norm referenced measures concomitant with daily class measures of performance;

   or

   (b) An IQ/achievement discrepancy in reading or writing or math using the regression tables.

C. Age of Eligibility *

The age of eligibility for students identified under this definition shall be from the fourth birthday through 20 years inclusive.

* The Work Group is recommending a change to age three but this requires a change to the Delaware Code.

Proposed Developmental Delay Definition and Eligibility Criteria

Proposed changes to Developmental Delay Definition and the eligibility criteria for the Administrative Manual: Programs for Exceptional Children (AMPEC).

A. Definition

A developmental delay is a term applied to a young child, who exhibits a significant delay in one or more of the following developmental domains: cognitive, communication (expressive and/or receptive), physical (gross motor and/or fine motor), social/emotional functioning, and adaptive behavior. A developmental delay shall not be primarily the result of a significant visual or hearing impairment. The assessment of a child suspected of a developmental delay should be sensitive to socio-cultural differences and previous experiences.

B. Eligibility Criteria

In order for an IEP team to determine eligibility for special education services under the Developmental Delay category, the following is required:

1. Standardized test scores of 1.5 or more standard deviations below the mean in two or more of the following developmental domains: cognitive, communication (expressive and/or receptive), physical (gross and/or fine), social/emotional functioning or adaptive behavior;

   or

2. Standardized test scores of 2.0 or more standard deviations below the mean in any one of the developmental domains listed above;

   or

3. Clinical judgment of the IEP team that is based on the multiple sources of information used in the assessment process and with justification documented in writing in the evaluation report.

C. Age of Eligibility *

The age of eligibility for classification under the developmental delay classification is from the third birth date until the fourth birth date.

* The Work Group is recommending a change from the third birth date until the tenth birth date or the end of third grade whichever occurs first. This requires a change in the Delaware Code.

Pre-School Recommendations

The Work Group has developed a set of recommendations for pre-school services for children with disabilities. These recommendations are part of the overall vision of restructuring services. They are also designed to be able to stand-alone and move forward regardless of the status of the other recommendations. As long as there is no loss of resources to districts, this section of the recommendations has almost universal support.

There is one underlying principle that is critical to understanding pre-school services for children with disabilities. The principle is the LRE provision of IDEA '97, which for pre-school children stresses the delivery of supports and services the child needs in the child's "natural environment," i.e., the environment in which the pre-school child would be if they did not have a disability. This includes the child's home, day-care, and pre-school programs, including Head Start, Delaware's ECAP Programs and private pre-school programs.

The Work Group recommends the establishment of a pre-school unit of one unit for every ten identified children. The pre-school unit would apply to children identified under the following federal and State educational classifications:

Developmental Delay*	(DD)
Educable Mentally Handicapped	(EMH)
Emotionally Disturbed	(ED)
Learning Disability	(LD)
Other Health Impaired*	(OHI)
Speech	

* The DD category would be expanded to include ages 3 through 5, or entry into kindergarten. The OHI category would include students identified as per the federal definition including ADD/ADHD. (See general recommendations section for further clarification.)

The pre-school unit would not include children identified under the following federal and State educational classifications:

Autistic	
Blind/Visually Impaired	(Blind/VI)
Deaf-Blind	
Deaf/Hard of Hearing Partially Deaf	(Deaf/HHPD)
Orthopedically Handicapped	(OH)
Severely Mentally Handicapped	(SMH)
Trainable Mentally Handicapped	(TMH)

This proposal combines the funds in the current Program for Children with Disabilities (PCD) and the unit funds for 4-and 5-year-old pre-school students. The following chart summarizes the pre-school funding proposal.

Pre-School Unit Proposal

	Students	Pre-School Unit Based on Proposed 1 to 10			Pre-School Unit Based on Current Resource 1 to 13		
		Units	Funding	Change	Units	Funding	Change
Appoquinimink	17.0	1.7	92,502.	43,202.	1.3	70,737.	21,437.
Brandywine	135.0	13.5	643,802.	106,657.	10.4	495,966.	(41,179).
Christina	110.0	11.0	533,313.	214,313.	8.5	412,106.	93,106.
Colonial	82.0	8.2	393,075.	116,039.	6.3	301,997.	24,961.
NCCVT	0.0	0.0	0.	0.	0.0	0.	0.
Red Clay	119.0	11.9	579,030.	177,856.	9.2	447,654.	46,480.
Caesar Rodney	57.0	5.7	327,841.	131,125.	4.4	253,070.	56,354.
Capital	73.0	7.3	411,143.	136,101.	5.6	315,398.	40,356.
Lake Forest	47.0	4.7	274,076.	17,934.	3.6	209,930.	(46,212).
Milford	50.0	5.0	300,850.	87,710.	3.8	228,646.	15,506.
Polytech	0.0	0.0	0.	0.	0.0	0.	0.
Smyrna	66.0	6.6	386,984.	101,516.	5.1	299,033.	13,565.
Cape Henlopen	31.0	3.1	147,678.	3,102.	2.4	114,331.	(30,245).
Delmar	3.0	0.3	16,597.	7,897.	0.2	11,064.	2,364.
Indian River	88.0	8.8	408,804.	34,374.	6.8	315,894.	(58,536).
Laurel	15.0	1.5	82,791.	(47,897.)	1.2	66,233.	(64,455).
Seaford	31.0	3.1	187,262.	(6,052.)	2.4	144,977.	(48,337).
SCVT	0.0	0.0	0.	0.	0.0	0.	0.
Woodbridge	24.0	2.4	135,427.	26,799.	1.8	101,570.	(7,058).
East Side	0.0	0.0	0.	0.	0.0	0.	0.
Positive Outcomes	0.0	0.0	0.	0.	0.0	0.	0.
Charter School of Wilmington	0.0	0.0	0.	0.	0.0	0.	0.
Campus Community	0.0	0.0	0.	0.	0.0	0.	0.
Total	**948.0**	**94.8**	**$4,921,175.**	**$1,150,676.**	**73.0**	**$3,788,606.**	**$18,107.**

The Work Group also recommends:

1. The pre-school units must be used to support the pre-school program.

2. There is total flexibility in the use of these units. This means they can be used as teaching/related service positions converted to a cash option or used for two para-educator positions.

3. The cash-in-value for these units would be tied to the mid-range of the salary scale (as related services currently are) and would include Division II and III funding.

4. The units would be considered teaching units for purposes of other unit counts and the system would be closely monitored to adjust for loss (or gains) in this area.

5. The pre-school program would not be considered a special program in terms of eligibility for tuition to cover the local share of the units.

6. A March 1 unit count would be used to establish the unit base for the following year. For this population of students the numbers are lowest in September and highest in June. A March date would provide a more accurate reflection of the numbers of children supported through the program while still allowing districts adequate planning time.

K-3 Recommendations

The final recommendations for kindergarten through third grade reflect a commitment to the concept of the Instructional Problem Solving Team while at the same time, responding to the input received from stakeholders. There is one underlying construct that is essential to the proposal.

This is the establishment of the 1:15 unit ratio for K-3. When the Work Group began, this was the intended plan but during the past legislative session, federal resources were used to continue this process. Those resources are not stable and the State commitment is currently 1:16.4.

The recommendation for K-3 is that the unit size be established at 1:15 for all students, including special education students classified as:

Developmental Delay*	(DD)
Educable Mentally Handicapped	(EMH)
Emotionally Disturbed	(ED)
Learning Disability	(LD)
Other Health Impaired*	(OHI)
Speech	

* The DD category would be expanded to include ages 3 through the child's tenth birthday or the end of grade 3, whichever occurs first. The OHI category would include students identified as per the federal definition, including ADD/ADHD. (See general recommendation section for further clarification.)

A new unit would be established called the Instructional Problem Solving (IPS) Unit. These units would be based on total student enrollments. Based on the FY '99 numbers and budget, approximately 1 unit would be generated for every 193 students. The following chart summarizes the K-3 funding proposal.

K - 3 Unit Proposal

	15.000 K-3 Unit	Estimated K - 3 Enrollment	193 IPS Unit	Net Impact Units	Net Impact Funding
Appoquinimink	2.000	1,525	7.9	0.9	48,972.
Brandywine	14.000	3,440	17.8	(1.2)	(57,227).
Christina	28.000	7,043	36.5	5.5	266,657.
Colonial	15.000	3,675	19.0	(2.0)	(95,872).
NCCVT	0.000	0	0.0	0.0	0.
Red Clay	17.000	5,269	27.3	4.3	209,229.
Caesar Rodney	7.000	1,576	8.2	1.2	69,019.
Capital	12.000	2,142	11.1	3.1	174,595.
Lake Forest	6.000	1,088	5.6	(0.4)	(23,326).
Milford	8.000	1,233	6.4	(1.6)	(96,272).
Polytech	0.000	0	0.0	0.0	0.
Smyrna	6.000	1,079	5.6	(2.4)	(140,722).
Cape Henlopen	6.000	1,314	6.8	(1.2)	(57,166).
Delmar	0.000	0	0.0	0.0	0.
Indian River	15.000	2,510	13.0	(3.0)	(139,365).
Laurel	3.000	657	3.4	(1.6)	(88,310).
Seaford	6.000	1,148	5.9	(1.1)	(66,448).
SCVT	0.000	0	0.0	0.0	0.
Woodbridge	3.000	621	3.2	0.2	11,286.
East Side	0.000	80	0.4	0.4	18,500.
Positive Outcomes	0.000	0	0.0	0.0	0.
Charter School of Wilmington	0.000	0	0.0	0.0	0.
Campus Community	0.067	143	0.7	(0.1)	(4,984).
Total	**148.067**	**34,543**	**178.8**	**1.0**	**$28,567.**

The Work Group also recommends:

1. These units would be covered under the 98% rule and returned to the building that generates them. Buildings could share positions in order to have access to needed expertise, but there would be at least 1 person per building whose responsibility includes coordination of the Instructional Problem Solving Team activities.

2. The units would be considered teacher/instructional units for purposes of other unit counts and the system would be closely maintained to adjust for loss (or gains) in this area.

3. The units would include Division II and Division III costs.

4. That there is no longer a difference between full-time and part-time special education students and, therefore, no 12.5-hour requirement.

5. There would be no variance in the use of units.

6. A percentage of teachers at the K-3 level must be certified in the area of special education.*

* One of the biggest concerns we heard from the stakeholders was the perceived loss of special education units. Even though the total number of units remains the same, there was concern that the needed special education expertise would not be there. The current range is between 11% and 24% of instructional positions (K-12). The mean is 18.53% and the median is 19.00%. Additional work is needed to establish an appropriate level for the K-3 program and to define the types of certifications that would qualify. The long-range plan should be a review of K-3 certification to ensure that all teachers are adequately prepared to work with diverse student learners. In the meantime, the Work Group felt that a percentage of teachers in the K-3 program should be certified in special education.

Third Grade is also the first checkpoint in the Accountability System and all children who fail to meet the performance standard in reading/language arts should have comprehensive diagnostic work-ups to determine the types and intensity of supports they will need to move forward. Whether these are IEPs or Individual Improvement Plans (IIPs), they should have a plan on how to move forward that clearly informs parents and teachers.

4-12 Recommendations

The Work Group felt that the greatest impact on the LD identification rate could be made by focusing on the pre-school and K-3 program. By third grade children who need on-going educational support in order to address their learning needs are more clearly identified. The work of the Instructional Problem Solving Teams will help to clarify which children need accommodations within the regular program and which students will need more intensive special education services in order to progress.

The group did make a few recommendations relative to the 4-12 program. These include:

1. The establishment of a single high incidence special education unit of 1:10.9. This would include children identified as Educable Mentally Handicapped (EMH), Emotionally Disturbed (ED), Learning Disabled (LD), and the new Other Health Impaired (OHI) category. This eliminates any perceived over identification based on higher funding ratios.

2. The elimination of the 12.5-hour requirement in order for students to be counted as full-time special education students. This concept made sense when it was first created and most special education students were served in resource rooms or self-contained classes. IDEA '97 mandates that placement decisions begin from the general education classroom and justifies any change to a more restrictive setting. The reality today is that most students can and should be served in general education classrooms with team teaching and various consultative models. The 12.5-hour requirement penalizes districts who try to serve students in these more inclusive programs.

Recommendations one and two go together. The actual funding ratio for special education units would be 1:8.4. However, the elimination of the 12.5-hour requirement keeps the number of units relatively stable. The following chart summarizes the funding proposal.

4 - 12 Proposal

	Total	Assumes 10.900 Unit	Unit Impact	Financial Impact
Appoquinimink	19.000	23.000	4.000	217,653.
Brandywine	82.000	85.000	3.000	143,066.
Christina	99.000	101.000	2.000	96,966.
Colonial	65.000	70.000	5.000	239,679.
NCCVT	44.000	43.000	(1.000)	(49,796).
Red Clay	98.000	94.000	(4.000)	(194,631).
Caesar Rodney	40.000	37.000	(3.000)	(172,547).
Capital	41.000	45.000	4.000	225,286.
Lake Forest	23.000	22.000	(1.000)	(58,314).
Milford	32.000	31.000	(1.000)	(60,170).
Polytech	12.000	12.000	0.000	0.
Smyrna	31.000	32.000	1.000	58,634.
Cape Henlopen	38.000	38.000	0.000	0.
Delmar	8.000	7.000	(1.000)	(56,207).
Indian River	71.000	61.000	(10.000)	(464,548).
Laurel	19.000	19.000	0.000	0.
Seaford	26.000	27.000	1.000	60,407.
SCVT	12.000	12.000	0.000	0.
Woodbridge	14.000	16.000	2.000	112,856.
East Side	0.000	0.000	0.000	0.
Positive Outcomes	1.000	1.000	0.000	0.
Charter School of Wilmington	0.000	0.000	0.000	0.
Campus Community	0.000	1.000	1.000	51,915.
Total	**775.000**	**777.000**	**2.000**	**$150,249.**

The Work Group also recommends:

1. The units would be covered under the 98% rule and returned to the buildings that generate them.

2. The units would be considered teacher/instructional units (current practice).

3. The units would include Division II and Division III costs (current practice).

4. The units count as teaching units in terms of generating other units. The system would be closely monitored to adjust for loss (or gains) in this area.

5. The elimination of the 20% variance for the use of special education units. All units generated by special education students would be used for certified special education staff. There would, however, be increased flexibility in the assignment of staff. The use of the 20% variance fluctuates among districts. Last year nine districts took 17% or more for variance. Seven districts took less than 5% (3 took none). There may need to be consideration of a phase-in for this recommendation. The following chart summarizes the variance.

Request For Variance In The Use Of Special Education Funds FY '99

DISTRICT	DIV I SP. ED. UNITS	% VARIANCE
Appoquinimink	35	2.8%
Brandywine	115	17%
Caesar Rodney	54	20%
Cape Henlopen	58	0%
Capital	83	13.5%
Christina	192	3.6%
Colonial	11.0	4.5%
Delmar	11	18%
Indian River	96	20.3%
Lake Forest	29.17	31% *
Laurel	25	12%
Milford	55	18%
New Castle County Voc.Tech	57	20%
Polytech	9	18%
Red Clay Consolidated	128	20%
Seaford	44	0%
Smyrna	49	0%
Sussex Tech	17	17.6%
Woodbridge	21	4.8%

* Lake Forest received a special one-year increase.

Alternate K-12 Recommendations

The group also considered collapsing of the high incident units (LD, ED, EMH, and OHI once it has been established) into a single unit K-12. This would begin to move the needed changes forward, especially in view of the failure to continue to reduce the unit size for K-2. The breakeven point for the elimination of the 12.5-hour requirement and collapsing of the units is 1:9.5. The other recommendations listed under the 4-12 proposal would also apply here. The following chart summarizes the funding proposal.

K-12 Proposal
Eliminate 12.5-Hour Requirement
and
Establish Single Unit at 1:9.5 for ED, EMH, LD

	Estimated FY 99 Units[1]	Proposed FY 99 Units[2]	Unit Change	Financial Impact
Appoquinimink	265.000	268.000	3.000	$163,239
Brandywine	685.000	692.000	7.000	$333,823
Christina	1,268.000	1,260.000	(8.000)	($387,864)
Colonial	648.000	648.000	0.000	$0
NCCVT	273.000	268.000	(5.000)	($233,835)
Red Clay	946.000	955.000	9.000	$437,922
Caesar Rodney	348.000	350.000	2.000	$115,032
Capital	380.000	373.000	(7.000)	($394,247)
Lake Forest	207.000	202.000	(5.000)	($291,570)
Milford	231.000	227.000	(4.000)	($240,680)
Polytech	81.000	84.000	3.000	$172,152
Smyrna	208.000	208.000	0.000	$0
Cape Henlopen	266.000	274.000	8.000	$381,104
Delmar	48.000	47.000	(1.000)	($55,322)
Indian River	475.000	480.000	5.000	$232,275
Laurel	122.000	125.000	3.000	$165,582
Seaford	230.000	224.000	(6.000)	($362,442)
SCVT	89.000	85.000	(4.000)	($193,364)
Woodbridge	107.000	107.000	0.000	$0
East Side	4.138	3.000	(1.138)	($52,631)
Positive Outcomes	4.000	3.000	(1.000)	($54,865)
Charter School of Wilmington	28.000	28.000	0.000	$0
Campus Community	17.153	16.000	(1.153)	($59,858)
Total	**6,930.291**	**6,927.000**	**(3.291)**	**($325,549)**

Notes: 1 Excludes Pre-k units generated in EMH, SED and LD;
2 Excludes Pre-k units generated in EMH, SED and LD

Other Recommendations

The Work Group had two other recommendations that were beyond the scope of their assignment. However, especially with the first one, there appears to be broad-based support.

Separation of the current Physically Impaired category into the federal definition of Orthopedically Handicapped (OH) and Other Health Impaired (OHI).

Delaware's PI unit numbers have grown slowly but steadily with the introduction from the Office of Special Education Programs, United States Department of Education, of Attention Deficit Disorder and Attention Deficit Hyperactivity Disorder under the Other Health Impaired federal category. The needs of this population are more closely aligned with other high incidence disability categories and the Work Group felt this change should be made now or the number of PI units will continue to rise. This will also help clarify which PI students are eligible for the recently created summer school program. The following chart summarizes the growth of PI units.

Physically Impaired
Compared To Total Population (School Years: 88/89 - 98/99)
(88/89 - 97/98 Based on June 1 Count, 98/99 Based on December 1 Count)

	88/89	89/90	90/91	91/92	92/93	93/94	94/95	95/96	96/97	97/98	98/99
Physically Impaired	54	233	243	286	338	394	501	577	656	777	910
% PI to Total Population	0%	0%	0%	0%	0%	0%	0%	1%	1%	1%	1%
% PI to Total Special Education Population	1%	2%	2%	3%	3%	3%	4%	4%	4%	5%	6%

The second recommendation was to do further study of the related services resources. The group felt that a generic related services unit should be created. The unit should be based on total enrollment and should include Division II and Division III costs.

Comments on the above report are welcome. Please direct your comments to:

Martha Brooks
Department of Education
Townsend Building
P.O. Box 1402
Dover, DE 19903
(302) 739-5471 (telephone)
(302) 739-2388 (fax)
mbrooks@state.de.us (email)

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Attachment A

Learning Disability Work Group Membership List

Aghazadian, Marie-Anne
Parent Information Center of DE, Inc.

Brooks, Martha
Department of Education

Carnevale, David, School Psychologist
Cape Henlopen School District

Dwyer, Kevin
National Association of School Psychologist

Glutting, Joseph
School of Education
University of Delaware

Rechsteiner, Chuck, School Psychologist
Indian River School District

Robbins, Paul
Division of Behavioral Health, AI duPont Hospital for Children

Russo, Pam, Education Diagnostician
Colonial School District

Smailer, Charles
Office of Civil Rights, U.S. Department of Education

Smith, George
Department of Education

Suleski, William, Director Special Services
Capital School District

Toomey, Martha
Department of Education

Weeks, Loretta, Director Children with Special Health Care Needs
Division of Public Health, Department of Health and Social Services